PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10/782,408

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			10					RATE	FEE]	RATE	FEE	
FOR			NUMBER FILED NUI		NUMB	ER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			/5 minus 20= * (8		X\$ 9=	<u> </u>	OR	X\$18=		
INDEPENDENT CLAIMS			2 minus 3 = * 8)		X43=		OR	X86≃		
Мι	JLTIPLE DEPE	NDENT CLAIM P	RESENT					+145=		1	+290=		
* 11	the difference	e in column 1 is	less than zero, enter "0" in column 2				Ĺ	TOTAL	`	OR	TOTAL	770	
CLAIMS AS AMENDED - PART II								TOTAL		OR	OTHER	770	
		(Column 1)	(Column 2)			(Column 3)	_	SMALLE	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	<u> </u>	=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=		
							L	TOTAL			TOTAL ADDIT. FEE		
		(Column 1)		(Columr	າ 2)	(Column 3)	,	ADDIT. FEE		1	ADDIT. FEET		
AMENDMENT B		CLAIMS REMAINING AFTER 4MENDMENT		HIGHES NUMBE PREVIOU PAID FO	R JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=] [X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						┛╏	1.5			.000		
								+145=		OR	+290= TOTAL		
										OR	ADDIT. FEE		
		(Column 1)	1	(Column		(Column 3)	7 -		·	i		,	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	R ISLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=			1300-		
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE "**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											ייאונזן	,	
	f the "Highest Nur	mber Previously Pa	id For" IN THI	S SPACE is le	ess thar	20, enter "20."	. A			OR	TOTAL ADDIT: FEE		